



## **BRP WS 21** Approval to Conduct Pilot Study

# **Instructions and Supporting Materials**

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### Introduction

DEP *Permit Applications*, as well as *Instructions & Support Materials*, are available for download from the DEP Web site at [mass.gov/dep](http://mass.gov/dep) in two file formats: Microsoft Word and Adobe Acrobat PDF. Either format allows documents to be printed.

*Instructions & Support Materials* files in Microsoft Word format contain a series of documents that provide guidance on how to prepare a permit application. Although we recommend that you print out the entire package, you may choose to print specific documents by selecting the appropriate page numbers for printing.

*Permit Applications* in Microsoft Word format must be downloaded separately. Users with Microsoft Word 97 or later may complete these forms electronically.

Permitting packages in Adobe Acrobat PDF format combine *Permit Applications* and *Instructions & Support Materials* in a single document. Adobe Acrobat PDF files may only be viewed and printed without alteration. *Permit Applications* in this format may not be completed electronically.



## Permit Fact Sheet

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### 1. What is the purpose of this approval?

This approval serves to protect the public health and welfare by assuring that the pilot study follows the procedures set forth in the Division of Water Supply's Guidelines and Policies for Public Water Systems and that the finished water will meet minimum drinking water standards. Guidelines and Policies for Public Water Systems are available from State House Bookstore.

This permit consists of an approval to conduct a pilot study to determine the adequacy of the treatment process to deliver water of good quality that meets the standards established by DEP. Legislative authority is stated in MGL Chapter 111, s. 160A and regulatory authority is stated in 310 CMR 22.04 of the Drinking Water Regulations.

### 2. Who must apply?

Public water suppliers or their representatives must apply if they plan to conduct water treatment pilot studies on their drinking water systems.

### 3. What other requirements should be considered when applying for this approval?

If the water supplier or their representative apply for this permit as part of a facility modification, it may be necessary to apply for other water treatment permits, e.g. BRP WS 22, 23, 24, or 25.

**Note:** Approvals of this type may require MEPA review. Please carefully examine 301 CMR 11.00, the MEPA Regulations, to determine if your project exceeds the MEPA review thresholds, or for more information contact the MEPA Unit of the Executive Office of Environmental Affairs (100 Cambridge Street, Boston, MA 02202; (617-727-5830). **DEP cannot begin technical review of the application until the MEPA process has been completed, unless otherwise agreed to in writing.** Copies of MEPA filings (with reference to any applicable Transmittal numbers) should be sent to the appropriate program offices in Boston and the MEPA Coordinator in the appropriate Regional Office.

**Note:** These additional requirements are intended to serve as a guide to the applicant. It does not necessarily include **all** additional requirements.

### 4. What is the application fee?

The application fee is \$1,050.

### 5. What is the Primary Permit Location?

PRIMARY PERMIT LOCATION:

Department of Environmental Protection

\_\_\_\_\_\* Regional Office

Water Supply

\*See "Addresses and Phone Numbers" page included in this package.

### What is the Reserve Copy Location?

RESERVE COPY LOCATION:

None Required.



## Permit Fact Sheet

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### 6. What are the timelines?

As of July 1, 1992 the timelines are:

	T1	T2*
BRP WS 21	60	60

\*(A second technical review will only be conducted if necessary).

*There is no public comment or administrative completeness review period for this approval.*

### 7. What is the annual compliance fee?

There is no annual compliance fee for this approval.

### 8. How long is this approval in effect?

This permit shall remain in effect for 2 years from the approved date or as otherwise determined by DEP, as long as the study continues to meet minimum drinking water standards and conforms to current Division of Water Supply guidelines and policies described in *Guidelines and Policies for Public Water Systems*.

### 9. How can I avoid the most common mistakes made in applying for this approval?

- Attach all material requested in the Application Completeness Checklist.
- Submit fee and one copy of the DEP Transmittal Form to: Department of Environmental Protection, P. O. Box 4062, Boston, MA 02211.

### 10. What are the regulations that apply to this approval?      Where can I get copies?

These regulations include, but are not limited to:

- Drinking Water Regulations, 310 CMR 22.00.
- Timely Action and Fee Provisions, 310 CMR 4.00.
- Administrative Penalty Regulations, 310 CMR 5.00.

These may be purchased at:

State House Bookstore  
Room 116  
Boston, MA 02133  
617-727-2834

State House West Bookstore  
436 Dwight Street  
Springfield, MA 01103  
413-784-1376



## Application Completeness Checklist

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- ☐ The DEP Transmittal Form is completed.
- ☐ Application Form BRP WS Application is completed.
- ☐ A cover letter is attached explaining the request.

To submit the application package:

- ☐ Checklist items have been completed.
- ☐ Send one copy of the application along with one copy of the DEP Transmittal Form to:

Department of Environmental Protection  
\_\_\_\_\_ \* Regional Office  
Water Supply

\*See "Addresses and Phone Numbers" page included in this package.

- ☐ Send fee of \$1,050 in the form of check or money order made payable to *Commonwealth of Massachusetts*, along with one copy of the DEP Transmittal Form to:

Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211



## Massachusetts Department of Environmental Protection

# Addresses and Phone Numbers

DEP Boston  
One Winter Street  
Boston, MA 02108  
Telephone: (617) 292-5500  
Fax: (617) 556-1049  
TDD: (617) 574-6868

William X. Wall Experiment Station  
37 Shattuck Street  
Lawrence, MA 01843  
Fax: (978) 688-0352  
**Division of Environmental Analysis**  
Telephone: (978) 682-5237  
**Air Quality Surveillance**  
Telephone: (978) 975-1138

Office of Watershed  
Management  
627 Main Street  
Worcester, MA 01608  
Telephone: (508) 792-7470  
Fax: (508) 839-3469

Millbury Training Center  
Route 20 Millbury, MA 01527  
Telephone: (508) 368-5600  
Fax: (508) 755-9253  
**Residuals Sludge Management**  
Telephone: (508) 368-5606  
**WWT Operator Certification**  
Telephone: (508) 368-5698

DEP Western Region  
436 Dwight Street  
Suite 402  
Springfield, MA 01103  
Phone: (413) 784-1100  
Fax: (413) 784-1149



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Westfield  
Westhampton  
West Springfield  
West Stockbridge  
Whately  
Wilbraham  
Williamsburg  
Williamstown  
Windsor  
Worthington

DEP Central Region  
627 Main Street  
Worcester, MA 01608  
Phone: (508) 792-7650  
Fax: (508) 792-7621  
TDD: (508) 767-2788



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DEP Southeast Region  
20 Riverside Drive  
Lakeville, MA 02347  
Phone: (508) 946-2700  
Fax: (508) 947-6557  
TDD: (508) 946-2795



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West Bridgewater  
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Whitman  
Wrentham  
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DEP Northeast Region  
1 Winter Street  
Boston, MA 02108  
Phone: (617) 654-6500  
Fax: (617) 556-1049  
TDD: (617) 574-6868



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North Andover  
North Reading  
Norwood  
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Winthrop  
Woburn



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection – Drinking Water Program

# BRP WS Application

For Water Supply Permits or Approvals

Transmittal Number \_\_\_\_\_

Facility ID# (if known) \_\_\_\_\_

## A. Application

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Is this application for an ☐ Original or a ☐ Resubmittal?

2. Applicant:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Contact \_\_\_\_\_

Telephone \_\_\_\_\_

3. Consultant:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Contact \_\_\_\_\_

Telephone \_\_\_\_\_

## B. Permit

Please check which permit or approval you are applying for:

Underground Injection Control

☐ BRP WS 06 Underground Injection Control Registration

Zone II Determination for Existing Sources

☐ BRP WS 07 Approval to Conduct Pump Test for Zone II Delineation

☐ BRP WS 08 Approval of Zone II Delineation

Cross Connection

☐ BRP WS 09 Plan Approval

New Technology

☐ BRP WS 11 Minor New Technology Approval; where no field test required  
☐ Drinking Water Additive  
☐ Cross Connection Device  
☐ Water Vending Machine  
☐ Other(specify): \_\_\_\_\_

☐ BRP WS 12 Major New Technology Approval: where field testing is required

☐ BRP WS 27 New Technology with Third-party Approval

☐ BRP WS 28 Vending Site/Source Prototype

☐ BRP WS 30 Vending Site Approval

☐ BRP WS 31 Vending and POU/POE Devices with Third-party Approval

New Source Approvals <70 gpm

☐ BRP WS 13 Exploratory Phase, Site Examination, Land Use Survey and Approval to Conduct Pumping Test

☐ BRP WS 15 Pumping Test Report Approval and Approval to Construct Source

New Source Approvals >70 gpm

☐ BRP WS 17 Exploratory Phase, Site Examination & Land Use Survey

☐ BRP WS 18 To Conduct Pumping Test

☐ BRP WS 19 Pumping Test Report Approval

☐ BRP WS 20 To Construct Source

Water Treatment Approvals

☐ BRP WS 21 To Conduct Pilot Study

☐ BRP WS 22 Pilot Study Report

☐ BRP WS 23 To Construct Facility <1 mgd

☐ BRP WS 24 To Construct Facility >1 mgd

☐ BRP WS 25 Treatment Facility Modification

☐ BRP WS 29 Water Treatment: Chemical Addition Retrofits of Water Systems > 3,300 people

☐ BRP WS 33 Distribution Modifications < 3,300 people

☐ BRP WS 34 Water Treatment: Chemical Addition Retrofits of Water Systems < 3,300 people

Water Quality Assurance

☐ BRP WS 26 Sale or Acquisition of Land for Water Source

☐ BRP WS 36 Abandonment of Water Source

Distribution System Modifications

☐ BRP WS 32 Systems > 3,300 people

☐ BRP WS 34 Systems < 3,300 people

## C. Certification

"I certify, under penalty of law, that this application and all attachments were prepared under my supervision, in accordance with a system designed to ensure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted in this application, the information submitted is, to the best of my knowledge and belief, true, accurate and complete."

Print Name \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Position/Title \_\_\_\_\_

Date \_\_\_\_\_